

Voluntary - Premium Cost

University of Kentucky
 Student Health Insurance Plan
 2024-2025 Final Premium Rates
 Voluntary - Unfunded Domestic, OPT and Blue Grass students

| | Fall | | Spring/Summer | |
|----------------|------------------------------------|----------|----------------------------------|----------|
| | 8/15/2024 through 12/31/2024 | | 1/1/2025 through 8/14/2025 | |
| Medical | | | | |
| Student | \$ | 1,244.00 | \$ | 2,034.00 |
| Spouse | \$ | 1,244.00 | \$ | 2,034.00 |
| Child | \$ | 1,244.00 | \$ | 2,034.00 |
| Children | \$ | 2,488.00 | \$ | 4,068.00 |